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CUSTOMER NO. 28465

Attorney Docket No.: 218728-000199
Date: September 22, 2003

MAIL STOP PATENT APPLICATION
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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Date of Deposit: September 22, 2003
I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Stephanie Warner-Wallace

Name (typed or printed)

Stephanie Warner-Wallace
Signature



Sir:

We enclose the following papers for filing in the United States Patent and Trademark Office in association with a new patent application:

By: Benjamin BAUDRY and Olivier ISNARD

For: METHOD FOR CONTROLLING DATA RETRANSMISSION AND CONTROL UNIT
FOR IMPLEMENTING THE METHOD

- ☒ Assignee NORTEL NETWORKS LIMITED.
- ☒ Patent Cover Page - 1 sheet.
- ☒ Application - 20 sheets; including 10 claims total, 2 independent claims.
- ☒ 5 sheets of drawings (formal).
- ☐ Declaration and Power of Attorney.
- ☐ An Assignment of the invention to _____, a corporation of _____.

- ☒ Benefit of the filing date of French Application No. FR 02 12862 filed October 16, 2002 is claimed pursuant to 35 U.S.C. 119.
- ☒ A certified copy of French Application No. FR 02 12862.
- ☐ A first preliminary amendment
- ☐ An Information Disclosure Statement Under 37 CFR 1.97, including ____ references.
- ☒ The filing fee has been calculated as shown below:

FOR:	(COL. 1) NO. FILED	(COL. 2) NO. EXTRA	SMALL ENTITY		OTHER THAN A SMALL ENTITY	
			RATE	FEE	RATE	FEE
BASIC FEE				\$ OR \$		750.00
TOTAL CLAIMS	10 - 20=	0	x 9 =	\$ 0	x 18 =	\$ 0
INDEP CLAIMS	2 - 3=	0	x 42 =	\$ 0	x 84 =	\$ 0
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENTED			+ 140 =	\$ 0	+ 280 =	\$ 0
* If the difference in Co. 1 is less than zero, enter "0" in Col. 2.			TOTAL	\$ OR \$	TOTAL	\$ 750.00

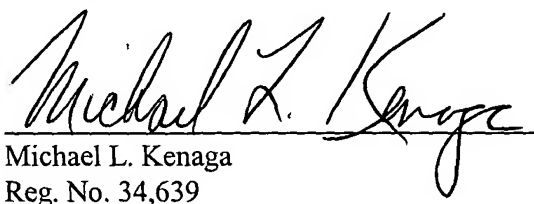
- ☒ A check in the amount of \$750.00 to cover the filing fee(s) for the application is enclosed.
- ☐ Please charge our Deposit Account No. 18-2284 in the amount of \$ _____. A duplicate copy of this letter is enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional filing fees that may be required under 37 CFR 1.16 for this application and for any amendment thereto, or credit any overpayment to Account No. 18-2284. A duplicate copy of this letter is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. 18-2284. A duplicate copy of this letter is enclosed.
- ☒ Any patent application processing fees under 37 CFR 1.17.
- ☐ The Issue Fee set in 37 CFR 1.18 at or before mailing of the Notice of Allowance, pursuant to 37 CFR 1.311(b).

Please address all telephone calls to Michael L. Kenaga at telephone number (312) 368-8937.

Please address all correspondence to:

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Respectfully submitted,

A handwritten signature in black ink, appearing to read "Michael L. Kenaga", is written over a horizontal line. The signature is fluid and cursive.

Michael L. Kenaga
Reg. No. 34,639

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